PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUL FEE

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications. Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying

23446	7590 06/26	/2009				C	41614	of Mailing or Transr	-1-ston
500 WEST MAD SUITE 3400		LTD	I S a t	her State ddro rans	cby certify that the s Postal Service we assed to the Mail mitted to the USP	deposited with the United class mail in an envelope above, or being facsimile te indicated below.			
CHICAGO, IL 6	1	Mirut P. Dalal				(Depositor's name)			
		/Mirut P. Dalal/			/	(Signature)			
				[Se	ptember 28	3, 20	009	(Dute)
APPLICATION NO.	FILING DATE			FIRST NAMED INVENTOR			ATTORNEY DOCKET NO.		CONFIRMATION NO.
10/765,615 01/27/2004				Shiv Kumar Gupta			15397US01 1349		1349
TITLE OF INVENTION:	SYSTEM, METHOD,	AND A	APPARATUS FOR	FIRMWARE CODE-	cov	VERAGE IN COM	MPLEX	SYSTEM ON CHIP	
APPLN, TYPE	SMALL ENTITY	ISSUE FEE DUE		PUBLICATION FEE DUE		PREV. PAID ISSUE FEE		TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO		\$1510	\$300		\$0		\$1810	09/28/2009
EXAMINER			ART UNIT	IIT CLASS-SUBCLASS					
MANOSKEY, JOSEPH D			2113	714-033000					
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.355) CFR 1.355 Change of correspondence address (or Change of Correspondence Address form FT0/SB/122) attached. — "Fee Address" indication (or "Fee Address" Indication form FT0/SB/47, Rev 05-02 or more recent) attached. Use of a Customer Number is required.				2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agent OR, Alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 listed, no name will be printed.					
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON PLEASE NOTE: Unless an assignee is identified below, no assigner recordation as set forth in 37 CPT 3.11. Completion of this form is N (A) NAME OF ASSIGNEE Broadcom Corporation				data will appear on the patent. If an assignee is identified below, the document has been filed for J's absolution for filing an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY) Irvine, CA					
Please check the appropri	iate assignee category or	catego	ories (will not be pr	inted on the patent):		Individual XXI Co	orporati	ion or other private gro	up entity 🔲 Government
4a. The following fee(s) are submitted: 23 Issue Fee 33 Publication Fee (No small entity discount permitted) Advance Order - # of Copies				b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) ☐ A check is enclosed. ☐ Payment by credit card. Form PTO-2038 is attached. ☐ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 13—0017 (encloses an extra copy of this form).					
	s SMALL ENTITY state	us. See	37 CFR 1.27.	☐ b. Applicant is no	lon	ger claiming SMA	LL EN	TITY status. Sec 37 CI	FR 1.27(g)(2).
NOTE: The Issue Fee an interest as shown by the	d Publication Fee (if req ecords of the United Sta	uired) ites Pat	will not be accepte ent and Trademark	d from anyone other the Office.	an ti	he applicant; a reg	istered:	attorney or agent; or th	e assignee or other party in
Authorized Signature	/Mirut P. I	ala	1/			Date	Sept	tember 28, 20	009
Typed or printed name Mirut P. Dalal				Registration No. 44,052					
This collection of inform an application. Confiden submitting the complete this form and/or suggest Box 1450, Alexandria, V Alexandria, Virginia 223	ation is required by 37 (tiality is governed by 35 I application form to tho ons for reducing this bu irginia 22313-1450. DO 13-1450.	FR 1.3 U.S.C USPI rden, s O NOT	311. The informati . 122 and 37 CFR TO, Time will vary hould be sent to the SEND FEES OR	on is required to obtain 1.14. This collection is depending upon the in the Chief Information O COMPLETED FORMS	or r s est ndiv ffice S TO	etain a benefit by imated to take 12 idual case. Any c er, U.S. Patent and O THIS ADDRES	the pub minuter ommen Trader S. SEN	lic which is to file (and s to complete, including ts on the amount of ti- nark Office, U.S. Dept D TO: Commissioner	by the USPTO to process) g gathering, preparing, and ne you require to complete artment of Commerce, P.O. for Patents, P.O. Box 1450,

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.